

## TACTICAL RESPONSE REPORT/Chicago Police Department

1. DATE OF INCIDENT 13-SEP-2014		TIME 22:12:00	2. ADDRESS OF OCCURRENCE 2349 W LAKE ST CHICAGO, IL 60612				3 LOCATION CODE 304	4 BEAT/OCUR 1223								
MEMBER INVOLVED <input type="checkbox"/> DNA	5. POSITION 9161	6. LAST NAME PASKO	7. FIRST NAME MATHEW J	8. STAR NO 3876	9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	10. RACE CODE WHI	11. AGE 510	12. HT. 166								
	14. DATE OF APPT. 28-AUG-2005	16. EMPLOYEE NO. [REDACTED]	18. UNIT & BEAT OF ASSIGNMENT 311 6744E	17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off	18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No										
	20. LAST NAME FORD	21. FIRST NAME DENZEL	22. M.F. <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	23. SEX BLK	24. RACE 25. D.O.B. [REDACTED]	26. HT. 600	27. WT. 220									
	20. ADDRESS [REDACTED]	20. TELEPHONE NO. [REDACTED]	19. WAS SUBJECT ARMED? OTHER (SPECIFY) VEHICLE ATTEMPTED TO STRIKE OFFICER WITH VEHICLE <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No	31. SUBJECT INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No	32. SUBJECT ALLEGED INJURY? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No											
	33. WHERE WAS MEDICAL TREATMENT OBTAINED? COOK COUNTY HOSPITAL - STROGER HOS	34. BY WHOM? [REDACTED]	35. CONDITION <input checked="" type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized	36. APPARENTLY NORMAL <input type="checkbox"/>	37. REFUSED MEDICAL AID <input type="checkbox"/> 05 Refused Medical Aid											
38. CHARGES PLACED				38. DNA	39. CB NO. 18974714	40. IR NO.	41. DNA									
SUBJECT INFORMATION <input type="checkbox"/> DNA	42. PASSIVE RESISTER		43. ACTIVE RESISTER		44. ASSAULT/ASSAULT		45. ASSAULT/BATTERY									
	46. ASSAULT/DEADLY FORCE															
	DO NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/>		FLED <input checked="" type="checkbox"/>		IMMINENT THREAT OF BATTERY <input type="checkbox"/>		ATTACK WITH WEAPON <input checked="" type="checkbox"/>									
	STIFFENED (DEAD WEIGHT) <input type="checkbox"/>		PULLED AWAY <input type="checkbox"/>		OTHER _____		ATTACK WITHOUT WEAPON <input type="checkbox"/>									
	OTHER _____		OTHER _____		OTHER _____		OTHER _____									
REASON FOR USE OF FORCE (Check all that apply)	47. MEMBERS RESPONSE		48. MEMBER'S ACTION		49. WEAPONS USED		50. ASSAULT/DEATH									
	MEMBER PRESENCE VERBAL COMMANDS ESCAPE HELPS WRISTLOCK ARMBAR PRESSURE SENSITIVE AREAS CONTROL INSTRUMENT OC/CHEMICAL WEAPON WAUTHORIZATION OTHER _____		OPEN HAND STRIKE TAKE DOWN / EMERGENCY HANDCUFFING OC CHEMICAL WEAPON CANINE TASER (Probe Discharge) TASER (Contact Stun) TASER (Laser Targeted) TASER (Span Disposed) OTHER _____		ELBOW STRIKE CLOSED HAND STRIKE/PUNCH IMPACT WEAPON (Describe in Box 40) OTHER _____		KNEE STRIKE KICKS IMPACT MUNITION (Describe in Box 40) OTHER _____									
							FIREARM <input checked="" type="checkbox"/> WEAPON <input checked="" type="checkbox"/> OTHER _____									
WEAPON DISCHARGE INCIDENT <input type="checkbox"/> DNA	51. OC/CHEMICAL WEAPON AUTHORIZED BY (NAME)			50. ADDITIONAL INFORMATION SUBJECT RAMMED HIS VEHICLE INTO MEMBERS VEHICLE.												
	POSITION [REDACTED]			51. OC/CHEMICAL WEAPON AUTHORIZED BY (NAME)												
	STAR NO. [REDACTED]			52. WEAPON SERIAL NO. (Include Letters) AAU06104												
	UNIT [REDACTED]			53. CHICAGO GUN REG. NO. R002162S												
				54. FIREARM OWNER ID NO. [REDACTED]												
55. WEAPON CERTIFICATE NO. [REDACTED]			56. PROPERTY INVENTORY NO. [REDACTED]			57. TYPE OF AMMUNITION USED Department Issued			58. NO. OF WEAPONS DISCHARGED BY THIS MEMBER 1		59. TOTAL NO. OF SHOTS MEMBER FIRED 14					
60. WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER			61. WAS FIREARM RELOADED DURING INCIDENT <input checked="" type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO			62. HOW WAS MEMBER'S HANDGUN WORN <input checked="" type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST)			63. HOW WAS MEMBER'S HANDGUN DRAWN <input checked="" type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW				64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD MAGAZINE		65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO	
66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) NONE			67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0-5 FT <input checked="" type="checkbox"/> 02 5-10 FT <input type="checkbox"/> 03 10-15 FT <input type="checkbox"/> 04 OVER 15 FT			68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input checked="" type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN			69. POSITION OF MEMBER DISCHARGING WEAPON <input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)				70. EVENT ID 1425616167			
INVESTIGATIVE INFO. <input type="checkbox"/> DNA	71. NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W.C./DIST. OF OCCUR.										72. NOTIFICATIONS (FIREARM INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W.C./DIST. OF OCCUR. <input checked="" type="checkbox"/> OP COMMAND <input checked="" type="checkbox"/> DET. DIV.					
	Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.															
	73. REPORTING MEMBER (Print Name) PASKO, MATHEW J 14-SEP-2014 05:11:09					STAR/EMPLOYEE NO 3876		SIGNATURE [REDACTED]								
	Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below															
	74. REVIEWING SUPERVISOR (Print Name) FORBES JR, TERENCE P					STAR NO 1432		SIGNATURE [REDACTED]			DATE REVIEWED 14-SEP-2014 05:12:21		TIME 10:47 AM 24 #27			

HX427436

7-RC-N

1425616167

## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR 3) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING: 1) THE DISCHARGE OF A FIREARM OR IMPACT MINIATURES BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2) MEMBERS USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STems FROM THE SAME INCIDENT DESCRIBED HEREIN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE       DNA       REFUSED       UNABLE TO INTERVIEW (Spec. "Not in town")

Subject hospitalized and unable to interview

### 76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

Based on the information available at the time of this report, it is the preliminary determination of the undersigned that Ofc. Pasko, Matthew #3876, acted in compliance with Department Policy. Ofc. Wesselhoff was knocked to the ground, when Offender Ford, Denzel IR#2078314, rammed his vehicle into Ofc. Wesselhoff's vehicle which in turn struck Ofc. Wesselhoff. Ford then reversed his vehicle ramming a second vehicle in and attempt to flee. Ofc. Wesselhoff was on the ground and unable to move and in the direct path of Fords only escape route thus placing him in fear of his life. Ofc. Pasko fearing for his life and also the life of Ofc. Wesselhoff fired his weapon. Log#1071524 U#14-81

### 77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION.

I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO/CRN# 1071524 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)  
RUIZ, BERSCOTT F

SIGNATURE  


DATE COMPLETED      TIME  
14-SEP-2014 05:26:46

### 79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS

ATTACHMENTS - PHOTOCOPIES OF:	<input type="checkbox"/> SUPPLEMENTARY REPORT <input type="checkbox"/> CASE REPORT <input type="checkbox"/> ARREST REPORT	<input type="checkbox"/> I.O.D. REPORT <input checked="" type="checkbox"/> OFFICER BATTERY REPORT <input type="checkbox"/> TD FROM SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)	BO. TOTAL TRR'S THIS EVENT No. 3
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H27